

Science, Technology, or Medicine? The Case of the Construction of Officer Selection Tests for the British Army

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Abstract

Military historians have debated the role of the War Office Selection Board (WOSB) in creating a “People's Army” and democratising the British military during the Second World War. The role of these boards in reconfiguring the identity of the psychiatrist and the boundaries of their expertise in mid-twentieth century Britain, however, has been largely overlooked. This paper examines the WOSB as a boundary object, which could be read as a democratising force, a treatment for a “sick” organisation, a set of scientific (and not so scientific) practices, or a technology for increasing the flow of officer candidates and the image of the army whose underlying principles were irrelevant. It examines the contexts that motivated actors to opt for these categorizations, and traces how the dominant narrative changed over time, whilst analysing the lingering aspects of categorizations and what proved particularly useful or problematic about these associations in the given context.

Introduction

The psychiatrists working at the British Army's War Office Selection Boards (WOSBs) during World War Two attempted to capitalise on their work's location somewhere between science and medicine. They saw their work as healing on a grand scale, with the disturbed British Army as their patient, and considered that their role was the traditional psychoanalytic doctor's role of working with the patient to bring about effective and lasting change. Furthermore, they noted that they were trusted by the common soldier to act in his interests because of their medical status and the association of this with concepts of confidentiality and welfare. However, this medical identity was also problematic; the association of psychiatrists with men's welfare was so great that many were suspected of helping malingerers to escape from doing their duty. This was just one way in which their loyalty to the Army was questioned.

To combat these suspicions of their motivations, psychiatrists remarked upon the scientific nature of the WOSBs, appealing to the objectivity of their work in attempts to establish authority and validity with military authorities. They claimed that their training enabled them to view men scientifically and dispassionately, unlike others who permitted their subjective views on things like the school that a man had attended to cloud their view. The scientific credentials of the WOSBs came under scrutiny though. Psychologists questioned the scientific validity of the procedures, and even after the war itself ended, the battle over whether selection was scientific played out in the pages of journals. The way in which the WOSBs became a contested object reflected the wrangling over the

boundaries of (and between) psychology and psychiatry, and the battle for authority which each set of practitioners was engaged in. At stake was not just what the WOSBs had been, but what psychology and psychiatry *would be*, and what subjects their claims to expertise encompassed.

Meanwhile, some senior Army personnel considered that the tests were a form of technology, where knowledge of the underlying principles used to construct the instrument was not required in order to operate it, and thus to them the categorization of this expertise was irrelevant. In fact, some senior military figures considered it desirable to actively divorce the WOSBs from the practitioners who had created them. This caused psychiatrists and psychologists to argue for the scientific nature of the WOSBs as an ongoing experiment rather than a completed product, which was continually refining human knowledge of personality and which could only be operated by those with psychological training or else results would be subject to misinterpretation and no longer reliable or valid.

The WOSBs thus existed at the juncture of science, technology and medicine. They acted as a boundary object which held different meanings for those operating within different knowledge boundaries, and which allowed individuals to work together in the absence of shared understanding or epistemological agreement.

What were War Office Selection Boards (WOSBs)?

1941 had seen 'considerable heart searchings' about the seeming lack of suitable officers for the British Army.¹ Rejection rates from Officer Cadet Training Units (OCTUs) were high, and this had resulted in a marked reduction of officer candidates applying for commission, as commanding officers were reluctant to put forward men only for them to fail and return to the ranks demoralized, and men themselves likewise sought to avoid failure. The existing system, where a Colonel interviewed candidates and selected them based on a "magic eye technique" (largely based on whether they had attended the "right" fee-paying school), was considered to be failing as private school candidates ran out and Colonels 'found themselves rather at sea... they understood too little the background and outlook of many of the candidates'.² This was considered to be a vital matter in the war effort, and up to thirty questions per week were being raised in Parliament demanding to know what was being done about the problems of rejection rates, dissatisfaction, and the need to officer the rapidly expanding army.

Sir Andrew Thorne, General Officer Commanding Scottish Command, had instigated an investigation of the "officer problem" by arranging experiments into the problem of selection in Edinburgh. Basing their work on the German officer selection techniques that Thorne had observed first-hand before the war as military attaché in Berlin, psychiatrists tested experimental measures of quality on candidates who had already been through training and whose quality was known. Many

of the German methods were rejected and replaced with tests of the psychiatrists' own devising. At the same time, John Bowlby, a psychiatrist working in Southern Command, was trialling interviews and intelligence tests at an OCTU and concluding that they held predictive value in picking out men who would pass the officer training. By the winter of 1941, these experiments had been reported on and a conference had been staged by the Adjutant General Sir Ronald Adam in Edinburgh to review the difficulties that had existed, and to discuss the creation of new style scientific selection boards.

The first new style WOSB was opened on 15 February 1942. It was a three day process, with the candidates residing with the men examining them. The staff included a Board President who was a military man of established standing, a technical staff including a Board Psychiatrist and Board Psychologist, and a Military Testing Officer of similar age to the candidates. The process involved intelligence tests, two questionnaires, psychological “pointer” tests such as word association, an interview with the President and one with the psychiatrist, and “leaderless group tests”. The leaderless group tests involved the candidates completing discussion or physical tasks as a group, without being allocated a leader and without knowing whether they were being assessed as individuals or as a team, in order to render visible how candidates dealt with pressure and with the psychological conflict between self- and group-interest. By mid April, it was decided that the trial had been a success, and the new WOSBs system was extended to replace all of the old interview system.

Diagnosing the Ills of the British Army

From the earliest attempts to make changes to officer selection, the work had a medical slant. The German officer selection programme had been developed by Professor Johann Baptist Rieffert and Max Simoneit, grounded in the holistic approach of Gestalt psychology and German characterology.³ The British programme, by contrast, was run by psychiatrists from the Royal Army Medical Corps (RAMC), also known at the time as “medical psychologists”. Unlike the experimental psychologists, these men were trained first as doctors, later specialising in psychiatry. J.R. Rees of the Tavistock Clinic had become Consulting Psychiatrist to the British Army just prior to the outbreak of war, and appointed many colleagues and like-minded thinkers to work in the Army as soon as he was able to recruit, which resulted in a largely psychoanalytic approach dominating Army psychiatry.⁴ The British psychiatrists echoed the holistic approach of the Germans, which they supplemented with ideas from psychodynamics, Lewinian field theory and social psychology.

These pre-existing interests meant that their investigations into the social organisation of the Army had begun earlier than the officially directed work on officer selection. Psychiatrists initially

fulfilled the traditional role of alienist, and 'no one ever reached an army psychiatrist without having caused a great deal of trouble {or concern to his superiors}'. When dealing with these troublesome men, psychiatrists issued a report 'that "made sense" about a person... [and] indicated the kind of situation in which he would be likely best to function.'⁵ In doing so, they prescribed reallocation as a cure for the ills of the group. Even before WOSBs had been established, psychiatrists working for local area commands had already begun to diagnose problematic soldiers as being not inherently problematic in themselves, but placed in the wrong role.

By developing the WOSBs and attempting to correctly allocate suitable men to officer roles before any trouble arose, the WOSBs were seen as having a 'prophylactic value... but also a therapeutic value in [their] effect on general morale' and therefore acting as a prescription for the institutional morale problems reflected in the questions to parliament.⁶ The Privy Seal, Sir Stafford Cripps, remarked that 'it is interesting to observe that [the WOSBs] are almost universally approved by those who go through them whether they pass or fail.'⁷ The psychiatrists, despite asking personal questions of candidates, found 'ready co-operation. Some officers even expressed a wish for a longer interview.'⁸ This was attributed to the view of the interview as a 'medical consultation', at the end of which the candidate was asked 'Do you think you have had a fair chance to put yourself across to me? ... Is there anything you would like to ask me?'⁹ Such questions highlighted the image of the psychiatrist as objective medic, fair in judgement and possessing knowledge which could be of use to the candidate as self-help guidance.

However, psychiatrists saw themselves as not only treating the individuals directly under their gaze who largely accepted their claims to expertise. As two psychiatrists explained, they had been

confronted by a number of problems which were appreciated by them to belong to the institution of the army as a whole or to groups within it and which accordingly could be treated by methods dealing with the dynamics of the group in its total setting.¹⁰

They viewed the Army as an organism and, believing that problems with soldiers originated with problems with the organisation, they aimed to heal the whole of the institution as a prophylactic measure. They foresaw that this would require more delicate handling, as the "patient" would likely be resistant to change.

In order to extend the boundaries of the discipline and to alter society, beginning with the Army, their "patient" had to be complicit. The principles of psychoanalysis informed the "treatment" of the problems of the Army; this approach required the participation of the "lay" members of the Army, 'for what characterizes effective analytic treatment is the active participation of the patient in working out its rationale.'¹¹ In order for such a collaboration to be possible across the knowledge boundary between the psychiatrists, their psychologist colleagues, and the military "patient",

WOSBs had to act as an ambiguous boundary object that was capable of supporting multiple interpretations of what its primary function was.¹² The psychiatrists explicitly recognised the multiplicity of meanings of the WOSB, noting that:

In so far as selection is a scientific evaluation of abilities and personality in relation to a job, it is a psychological procedure. In so far as it considers likely physical health and mental stability on a higher level of function and responsibility, it requires medical help. In so far as it selects for a specific field and level, it needs experts in the job and the job-analysis.¹³

The possibility of all of these understandings of what a WOSB was being able to simultaneously exist was deliberately crafted as a way of making the social medicine practised by the psychiatrists palatable. Ambiguity was seen as a strategic move necessary to get psychiatric expertise accepted, as 'overt attempts at clarity may be seen as pushy and self-serving in situations where people have little formal authority.' At the outbreak of war, the psychoanalysts had little influence in Britain beyond the asylum and private practice; even within the medical community in the interwar period, few doctors would mention an interest in analysis 'without the verbal equivalent of spitting three times over the left shoulder, and even to speak about the revival of war memories carried the risk of being accused of advocating free fornication for everyone.'¹⁴ Any unconcealed attempts to foist a programme of social engineering on the Army therefore were unlikely to succeed.

The head of Army psychiatry in Britain, Colonel J.R. Rees, described the role of the psychiatrist as that of being a "social surgeon".¹⁵ This metaphor was extended by others, who considered the WOSBs to be something akin to a graft or transplant, which was required in order to treat the damaged organism of the British Army alive, and yet the form of which must be carefully applied in order for it to be a success:

It would have been possible to construct a scheme for officer selection in which psychologists and psychiatrists applied their methods to the problem while the Army made use of their results, but to do so would have been to introduce a "foreign body" into the tissues of the Army which would have provoked an inevitable defense reaction.¹⁶

This suggests that psychiatrists carefully constructed the WOSB to be ambiguous and therefore camouflaged in order to seem familiar and acceptable to the Army. Psychiatrist T.F. Rodger was particularly vehement that methods must 'not developed along purely technical lines which would make it appear strange and mysterious to the outsider and would also usurp the Army's responsible role.'¹⁷ The concept of usurping related both to the psychoanalytic principle that patients must be actively engaged in therapy, but also revealed the tensions underlying the changes to officer selection. A number of senior military figures were expressing concern about what psychiatrists were doing to the Army. In part, this stemmed from more radical experiments within officer

selection such as the Regimental Nomination Scheme to get the rank and file to suggest officer candidates, which appeared radically and alarmingly socialist, and 'was given up as it was looked upon with horror by senior officers in particular.'¹⁸

The medical identity which had proved so useful in securing the trust of the men by the same token provoked the distrust of some senior officers. Where men trusted a medic to consider their welfare and thus accepted their questions happily, some military men were concerned that the psychiatrists' concerns for men's welfare extended too far, and led to them discharging men who were fit for service so that they would not have to face the horrors of warfare, as the headline 'Psychiatrists are Axeing Too Many Service Men' proclaimed.¹⁹ It was also feared that there might be some form of psychiatric "contagion", and that 'a tendency to use the psycho-analytical technique too extensively... if unwisely handled... might encourage the very tendencies it was hoped to combat.'²⁰

It also related to the common perception of the psychiatrist as being tied to taboos; concerns that officers might be revealing their innermost feelings to psychiatrists in their role as trusted medical confidant, and that these feelings might not be as wholesome as the image the Army wished to project of itself, were demonstrated through attempts to restrict and regulate the role of the psychiatrists' interview at the WOSB.²¹ Some psychiatrists did little to dispel concerns about the power they wielded as medics or to act with deference to their Army colleagues. One called a fellow officer a "moronic psychopath", and when this was referred to his superior, their response was that: 'This is a serious situation. I have known Dr Williams for a long time and have followed his work closely. I have never known him to be wrong in the diagnoses he makes.'²²

This view of psychiatrists having worrying links with deranged and deviant populations was expressed by none other than Winston Churchill himself, who considered that 'it would be sensible to restrict as much as possible the work of these gentlemen... it is very wrong to disturb large numbers of healthy normal men and women by asking the kind of odd questions in which the psychiatrists specialize.'²³ Because of the extent of his suspicions, Churchill established an Expert Committee on the Work of Psychologists and Psychiatrists in the Services to investigate what "these gentlemen" were doing. This report played down the medical role of the psychiatrist, noting that they saw men 'not as a doctor, but as an officer who, from his experience, is particularly skilled in summing-up the individual's character', but though the Committee was satisfied, concerns remained amongst senior, influential figures.²⁴

A Science of Selection

As the WOSBs became more established, the crisis in officer numbers passed, and the course of the war began to improve for Britain, the role of the psychiatrist in Army selection came under increased scrutiny. Challenged by military men over who knew best whether a man was officer

material or not, psychiatrists attempted to reassert their authority by appealing to the scientific nature of their work.²⁵

One of the reasons that psychologists and psychiatrists were brought in to work on developing the WOSBs was because of the terrible image that officer selection had in the public mind, where there were frequent allegations in the press and in Parliament that officers 'are not chosen on merit, but either, according to the school of critics, on some principle of class snobbery; or, according to another school, on some political considerations.'²⁶ The scientific objectivity of the technical staff was used as a way to show that the Army was a meritocratic institution, where 'problems of leadership and the selection of officers are receiving more and more attention... and a system of scientific tests... is being increasingly used', meaning that 'any tendency to select officers from a particular class... has long since disappeared.'²⁷

Beyond being a useful image to portray to the public, the scientific credentials of the WOSBs were also important to those with psychological training who developed them. Psychiatrists Sutherland and Fitzpatrick remarked that one of the three specific requirements that had to be met by any measures taken to create WOSBs was that 'the measures should be acceptable to the psychologist in that his participation was scientifically adequate.'²⁸ In addition to appearing relevant to the recruit and preserving the executive role and contribution of the Army representatives, it was important to the technical staff that the WOSBs support the interpretation of being a scientific endeavour. This was in order to satisfy the broader aims of the psychiatrists and psychologists, who considered that the generalizability of scientific laws offered the opportunity for extending the boundaries of their work and giving them the potential to study a far wider range of subjects:

The implications of any technique - sufficiently scientific and reliable - for selecting the potential leaders in a community are obviously tremendous... with suitable codifications they can be used to select leaders in any field: derivative techniques are, or have been used in the Civil Service, the National Fire Service, the Palestine Police, the India Office, the RAF, etc.²⁹

Psychologists working in Industrial Psychology had already created general "laws" for performing jobs as efficiently as possible through time and motion studies, and in breaking down jobs to their skill requirements and matching people to these had developed rules of vocational selection. However, when it came to officer selection, there was an 'absence of objective tests of the desired qualities [so] interview techniques which psychiatrists themselves had evolved successfully at Edinburgh constituted the most promising approach.'³⁰ This different approach was considered to be a good start based upon valid experimentation, though it would later be used by psychologists to challenge the scientific credentials of the WOSBs.

Although "more scientific" experimentally driven officer selection was popular with regular

soldiers and the press, the power of the claims to scientific expertise and objectivity were deemed threatening to Army authority by some senior officers. For instance, General Sir Bernard Paget, Commander-in-Chief of the Home Forces, wrote a letter of complaint about how the psychiatrists dominated WOSB decision-making 'by virtue of their technical knowledge and ability to present evidence.'³¹ Psychologists attributed this resentment of being studied, classified and regulated by psychologists was closely linked with issues of power, and the fear of 'forfeiting his free choice and being directed in all his doings from birth to the grave by an army of scientific experts.'³² The WOSBs therefore might represent the first step on a slippery slope to relinquishing all control of the operations of the Army to this "army of experts". A tussle ensued between these two "armies" over the meaning of the WOSBs, and whether they were an opportunity to let military common sense work, or the social laboratory for an experiment conducted by experts.

As each group attempted to overcome resistance of the WOSBs, they pursued what Barley, Leonardi and Bailey have termed a strategy of "clarity", trying to create a single meaning for the the WOSBs.³³ This approach to boundary objects is closely linked with power, as in endeavouring to force collaborators to accept a specific definition of the WOSBs rather than keeping them ambiguous enough to support different views, each group was justifying their own expertise and blocking the others' that held negative implications for them.

The negative implications for the Army of the psychiatrists dominating were that the their authority would be usurped, that the identity of the officer would potentially shift to meet the priorities of psychiatrists, and therefore that, insofar as the officer represented the Army as a whole, the identity of the institution of the Army itself would alter.³⁴ Because the WOSBs had been constructed as "Army friendly", with the Board President a military man who was able to make all final decisions, some psychological staff found that they experienced resistance or limitations. They were often of lower rank than non-technical men, and felt that their scientific practice was impeded by military staff: '[p]olicies which they advocated as scientifically sound were often rejected, and the methods they devised were often misapplied and misinterpreted by insufficiently trained personnel.'³⁵ Others bemoaned the President acting like an "amateur psychiatrist" and wasting the time of technical staff on unprofitable "experiments".³⁶

Historian of psychology Kurt Danziger has observed that the precarious nature of psychology as a field concerned with the slippery subject of human behaviour has meant that 'there may be something distinctly subversive about the suggestion that the sphere of methodology is not a realm of pure reason but an area of human social activity', and this indeed appears to have been the view of some of the psychologists involved in selection work.³⁷ Philip Vernon and John Parry, for instance, noted that:

the social sciences are at the same time the most immature and the most intractable of all the sciences precisely because they are concerned with man. Individuals differ too widely in their tastes, talents and temperaments to be readily amenable to scientific analysis and control.³⁸

For the psychiatrists, this was the danger of having their interpretation of the WOSBs overridden; their work would remain in the realm of “common sense” that could be dabbled in by anyone, rather than science that required specific expertise. This would mean that they would lose their newly gained disciplinary ground and be forced to return to the role of alienist who dealt with a minority of deviant members of society where their expertise was more established, rather than deal with society more broadly. For them, the work in the military represented a social laboratory that was a microcosm of wider society; their claims to expertise in a wider field after the war were dependent on the recognition of the validity of their expertise in working with a broader subject matter during the experiments of the war.

Psychiatrists attempts to broaden their field also brought them under fire from psychologists challenging their scientific credentials by questioning whether WOSBs could support the interpretation of being a scientific procedure. They argued that tests were not 'objectively scored' and that techniques were 'largely intuitive, and, although investigations into reliability and validity were planned, it was not possible to complete them.'³⁹ For the psychiatrists, whilst they desired validation, they felt that developing their work in new directions and achieving 'scientific insight' was the primary matter. Historian Brian Wynne has argued that 'practices do not follow rules; rather, rules follow evolving practices', and that technologies are 'underdetermined by any overall rationality.'⁴⁰ This was the approach that psychiatrists took to the WOSBs, where practices were established as the debate over scientific or psychoanalytic rationalities raged, arguing that '[t]he history of science shows clearly that the development of techniques of measurement and mathematical proof is a necessary but not a sufficient condition of progress.'⁴¹

This was, in part, a battle over the boundaries of the two disciplines; in extending its gaze to groups, “normal” people, and work, psychiatry threatened to encroach on the territory of psychology. The significant differences in approach also reflected two very different epistemologies; the psychiatrists' approach was based mainly on psychotherapy and field theory, which was 'so very different from that of headquarters psychologists' meaning that psychologists could not participate in the WOSBs without to some extent retraining.⁴² Furthermore, it threatened to damage the reputation of psychology as a fellow psychological science. Though psychiatrists argued that 'scientific methods had to be related to the total situation and not based on experimental approaches devised for laboratory conditions', psychologists disagreed and argued for the primacy of the experimental as far as possible.⁴³ Psychologists Colonel B. Ungerson noted that psychologists were

at pains to strongly adhere to scientific methods 'to overcome prejudice... if we do not validate strictly, then we can only offer psychologists' opinions against laymen's opinions.'¹⁴⁴ They concluded that 'though the aim was to educate the Army gradually into accepting scientific methods, the compromise eventually achieved showed considerable technical defects.'¹⁴⁵

Instruments and Technologies

Whilst psychologists and psychiatrists disagreed about the theoretical underpinnings and the scientific validity of the WOSBs, they both saw their own participation and an understanding of the principles on which WOSBs were based as necessary to their successful operation. Some senior figures in the Army instead saw the WOSBs as a technology which did not require ongoing collaboration. They felt that psychological input was not required beyond the development of the new methods. It was not even considered important that these be developed to suit particular specific purposes: 'the psychiatrists and psychologists concerned with [the WOSBs] development were surprised that visitors wanted to take over the new methods with little, if any, preliminary critical inquiry regarding their appropriateness for selection tasks other than finding potential officers.'¹⁴⁶ In this sense, some military personnel wished to clarify the boundary object of the WOSBs by defining them as a black boxed technology, which could be operated by the military without an understanding of the specific scientific principles that made them work.

The idea of the WOSBs as a tool or technology was a meaning that was broadly acceptable, even if the interpretations of the implications of this varied. Technical assistance had been sought in order for applied change to rapidly be achieved, and the Army would not have permitted the psychiatrists to continue work with theoretical but not practical outcomes during wartime. Psychiatrists recognised this, and noted that their job was 'to forge an instrument [of selection] which was part of the Army in that it made full use of both the experience and the traditions of the Army and of the resources of the psychological sciences.'¹⁴⁷ They even argued that this took priority over establishing scientific validity, noting that 'it is the rule rather than the exception in practical affairs, to have to use some method of solving a problem long before the efficiency of the chosen method can be accurately measured.'¹⁴⁸

Yet psychiatrists saw the Army as a testing ground for new scientific developments, and considered that the changing environment of the war and evolving institution of the modern army required their presence at WOSBs in order to continually recalibrate this instrument and develop ways of applying their underlying theories in new contexts. They resisted the interpretation of the WOSBs as a black boxed technology which could be divorced from the underlying principles and used independently, and argued that

some form of continuously available psychological help on the spot seems indispensable.

Certainly so, if the psychological techniques which are still tentative – both in principle and in practice - are to be further developed: and if suitable techniques are to be developed for each new special field.⁴⁹

When they described the WOSBs in instrumental terms, the comparisons were with aerial photographs, a “micro-stereoscope”, or stethoscope; and the point made that these tools were of considerable use to experts, but would reveal nothing of use to an untrained layperson.⁵⁰ They observed that the scientifically trained judgement was utterly vital to the WOSBs successful operation, noting that 'the instruments at present at our disposal for “measuring” personality are so crude and so much influenced by personal equations, particularly those of Presidents, that standards between Boards cannot be held constant.'⁵¹ Toward the end of the war, they looked to increase respect for the WOSBs as a scientific practice and not a technology operable by others, through training:

there must be a rise in the level of understanding of first principles. Flexibility in approach will be needed more than ever when Boards have to deal with the complex attitudes of officers and the other candidates as the war nears an end in Europe. This increase in flexibility through a greater understanding of the scientific aspects of the problems as a whole can be achieved only by more systematic training in theory and in practice.⁵²

Yet this would be an unsuccessful pursuit. Though the 1942 appointed Expert Committee had found in favour of the psychiatrists, and the 1943 attempts to limit psychiatrists role at the WOSBs by restricting them to interviewing “intimately” no more than 50% of candidates had been somewhat subverted by psychiatrists concocting their own definition of an “intimate” interview, they were not able to maintain the reading of the WOSBs as a psychological procedure, whether medical or scientific. In 1946, the Adjutant-General and Aide de Camp General to the King, Sir Richard O'Connor agreed with a War Office committee's recommendation to remove psychiatric staff from the WOSBs, on the basis of the strength of feeling against them.⁵³ The military had won the battle to define the WOSBs, and they became an exclusively military endeavour.

Conclusion

Initially, the WOSBs were an ambiguous boundary object, which was able to be interpreted as both an Army procedure and a therapy for an ailing organisation and a scientific experiment into prediction of personality. The psychiatrists who initiated the work on WOSBs deliberately engineered them to be flexible in their interpretation. This ambiguity facilitated longevity of collaboration between the army, psychiatrists and psychologists where a strategy of clarity was unnecessarily difficult and antagonistic.

Whilst the WOSBs emerged from the attempts of medics to remedy the problems of an organisation

diagnosed as maladjusted, as 'therapeutic procedures applicable to the institution as a whole', this reading became increasingly contested as the war progressed.⁵⁴ This was because the boundaries that the WOSBs traversed began to shift. As Sutherland and Fitzpatrick observed:

While the measures taken were spoken of at the time as “psychiatric”, it was realized that the traditional frontiers of psychiatry had been greatly extended and that the psychiatrists, and the psychologists who later joined them, were in fact in new roles in relation to the groups they were treating.⁵⁵

With these frontiers extending, psychiatrists no longer dealt exclusively with individuals deemed mentally maladjusted, but with groups and organisations, and with subjects considered to be normal and even superior. As such, they became a threat to military and psychological rivals in a battle over expertise. With different groups measuring success against different criteria, there were increasing attempts to clarify the object of the WOSBs in order to promote one agenda and push back against rival understandings. The power of different groups was at stake, and as it became increasingly evident that long-term collaboration was no longer likely, the hard work of reinforcing one's own meaning and the risk of antagonising other actors came to seem more worth the short term effort in exchange for the authority that could be won.

In moving away from the “lunatic fringe”, psychiatrists saw their work on WOSBs as part of a larger project of social hygiene and facilitating human relations, whereas many psychologists considered them to be taking limited steps in the field of vocational science. The field of vocational selection had traditionally belonged to the psychologists, and psychologists, threatened by the psychiatrists' encroachment on their disciplinary territory, pushed back against the idea of the WOSBs as scientific, arguing that whilst WOSBs were useful, psychological work had greater validity.

Likewise, military men sought to engineering an exclusively military interpretation of the WOSBs. In insisting that the WOSBs did not require psychiatric input to work, they could limit and even eliminate the role of the psychiatrists at the WOSBs. Military leaders saw psychiatrists as continuing to tinker unnecessarily with an essentially military tool. Churchill himself felt that choosing officers was a military matter, and that if a commanding officer was not a good judge then he was 'scarcely fit for his position.'⁵⁶ The psychological presence had been useful in improving the Army's image at a difficult time, but the sticky association of the psychiatrists with their medical role in treating the deviant was considered to cast unwanted aspersions on the ability of the Army leadership to function.

This battle for the definition of the WOSBs reflects a concern peculiar to the psychological sciences, where expertise pertaining to the “knowing” of human behaviour is considered by

practitioners to be constantly under threat from the amateur, and establishing methods is the key to defending this boundary. Attempts to bolster the boundary of expertise occurred at the borders of medicine and science, established legitimate fields of expertise. Ultimately, despite success in establishing a method of selection that remains in use and little changed today, because of their need to disguise their science in “Army friendly” non-technical form, the psychiatrists were unable to delineate the theories underpinning the work as scientific. As *The Times* noted: 'The psychologists may have introduced scientific checks and balances but the foundation is simply humanity and common sense.'⁵⁷

- 1 J. R. Rees, *The Shaping of Psychiatry by War* (W. W. Norton, Incorporated, 1945), p. 63.
- 2 Rees, p. 64.
- 3 L. M. Banks III, 'The Office of Strategic Services Psychological Selection Program' (U.S. Army Command and General Staff College, 1995), pp. 34–36.
- 4 H. V. Dicks, *Fifty Years of the Tavistock Clinic* (London: Routledge & K. Paul, 1970), p. 93.
- 5 'Box 205802225', p. 51, Tavistock Institute Archives.
- 6 J. D. Sutherland and G. A. Fitzpatrick, 'Some Approaches to Group Problems in the British Army', *Sociometry*, 8 (1945), 205–17 (p. 208).
- 7 'Joint Memorandum by the Lord Privy Seal, the First Lord of the Admiralty, the Secretary of State for War and the Secretary of State for Air on the Use of Psychologists and Psychiatrists in the Services', 31 July, 1942, CAB 66/27/10, National Archives, p. 3
- 8 Box 205802225, p. 57, Tavistock Institute Archives
- 9 J. Rickman, 'A Symposium on the Psychiatric Interview in Officer Selection', AMD 11 45/03/8 (April 1944), Tavistock Institute Archives, p. 8
- 10 Sutherland and Fitzpatrick, p. 205.
- 11 Sutherland and Fitzpatrick, p. 206.
- 12 W. C. Barley, P. M. Leonardi and D. E. Bailey, 'Engineering Objects for Collaboration: Strategies of Ambiguity and Clarity at Knowledge Boundaries', *Human Communication Research*, 38 (2012), 280–308.
- 13 H. Harris, *The Group Approach to Leadership-Testing* (Routledge & Paul, 1949), p. 232.
- 14 Frederick Mott, *Neurosis and Shell Shock* (London, 1919), p. 131 as quoted in R. Chickering and S. Forster, *The Shadows of Total War: Europe, East Asia, and the United States, 1919-1939* (Cambridge University Press, 2003).
- 15 Rees, p. 18.
- 16 Sutherland and Fitzpatrick, p. 208. This reference to rejection linked the work of the psychiatrists with other cutting edge medical research, as Peter Medawar was investigating the processes of tissue rejection and establishing the field of transplantation biology at this time.
- 17 Box 205802225, p. 7, Tavistock Institute Archives
- 18 A. Arnold-Brown, *Unfolding Character: The Impact of Gordonstoun* (Routledge & Kegan Paul, 1962), p. 84.
- 19 'Psychiatrists are Axeing Too Many Service Men', *The Daily Mail*, (England) Thursday June 1, 1944, p. 3
- 20 'Joint Memorandum by the Lord Privy Seal, the First Lord of the Admiralty, the Secretary of State for War and the Secretary of State for Air on the Use of Psychologists and Psychiatrists in the Services', 31 July, 1942, CAB 66/27/10, National Archives, p. 2
- 21 J. Rickman, 'A Symposium on the Psychiatric Interview in Officer Selection', AMD 11 45/03/8 (April 1944), Tavistock Institute Archives
- 22 M. Brearley, 'Obituary: Arthur Hyatt Williams', *The Guardian*, 11 October 2009, section Science <<http://www.theguardian.com/science/2009/oct/11/arthur-hyatt-williams-obituary>> [accessed 11 August 2014].
- 23 R. H. Ahrenfeldt, *Psychiatry in the British Army in the Second World War* (London: Routledge & K. Paul, 1958), p. 26.
- 24 'Joint Memorandum by the Lord Privy Seal, the First Lord of the Admiralty, the Secretary of State for War and the Secretary of State for Air on the Use of Psychologists and Psychiatrists in the Services', 31 July, 1942, CAB 66/27/10, National Archives, p. 2
- 25 For more on how the objective gaze of science has been used as a moral justification, see L. Daston and P. Galison, *Objectivity* (Zone Books, 2010).
- 26 W. Elliott 'Choice of Officers', *The Times* (England), Saturday March 15, 1941, p. 5
- 27 'Training of Officers: From our Special Correspondent with the Army', *The Times* (England), Saturday, February 14, 1942, p. 2
- 28 Sutherland and Fitzpatrick, p. 207.
- 29 Harris, p. 1.
- 30 P. E. Vernon and J. B. Parry, *Personnel Selection in the British Forces* (London: University of London Press, 1949), p. 56.
- 31 The Churchill Archives Centre, Grigg Papers, 9/7, letter 29 October 1942 as quoted in J. A. Crang, *The British Army and the People's War, 1939-1945* (Manchester University Press, 2000), p. 35.
- 32 Vernon and Parry, p. 12.
- 33 Barley, Leonardi and Bailey.
- 34 A. White, *Authorising the Science of the Workplace in Post-War Britain*
- 35 Vernon and Parry, p. 42.
- 36 M. Pines, *Bion And Group Psychotherapy* (Jessica Kingsley, 2000), p. 51.
- 37 K. Danziger, *Constructing the Subject: Historical Origins of Psychological Research* (Cambridge University Press, 1994), p. 5.
- 38 Vernon and Parry, p. 11.
- 39 Vernon and Parry, p. 58.
- 40 A. Irwin and B. Wynne, *Misunderstanding Science?: The Public Reconstruction of Science and Technology* (Cambridge: Cambridge University Press, 1996), p. 153.
- 41 B Morris, 'A Reply to Colonel Ungerson', *Occupational Psychology*, 24 (1950), p. 59.

- 42 Vernon and Parry, p. 56.
43 Box 205802222, p. 342, Tavistock Institute Archives
44 B Ungerson, 'Mr Morris on Officer Selection', *Occupational Psychology*, 24 (1950), p. 55.
45 Vernon and Parry, p. 55.
46 Box 205802225, p. 27, Tavistock Institute Archives
47 Sutherland and Fitzpatrick, p. 208.
48 Morris, p. 59.
49 Harris, p. 232.
50 Box 205802222, pp. 247-8, Tavistock Institute Archives
51 Box 205802222, p. 200, Tavistock Institute Archives
52 Box 205802222, p. 376, Tavistock Institute Archives
53 Crang, p. 38.
54 Sutherland and Fitzpatrick, p. 206.
55 Sutherland and Fitzpatrick, p. 205.
56 Prime Minister's personal minute, 13 March 1943, National Archives WO 259/77
57 'Selection of Officers', *The Times* (London, England), Friday June 26, 1942, p. 5